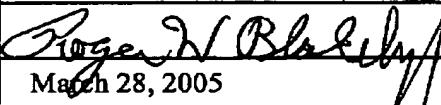
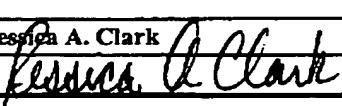


TRANSMITTAL FORM		Application No.	10/812,242
<i>(to be used for all correspondence after initial filing)</i>		Filing Date	March 29, 2004
		First Named Inventor	Chad Thomas Steward
		Art Unit	2819
		Examiner Name	Young, Brian K
Total Number of Pages in This Submission	13	Attorney Docket Number	55123P298

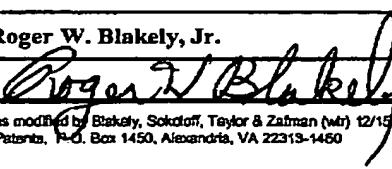
ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; height: 40px; width: 100%;">Facsimile Cover Sheet</div>	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Roger W. Blakely, Jr., Reg. No. 25,831 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 28, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Jessica A. Clark		
Signature		Date	March 28, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wdr) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known																																																																																																																									
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																																																																																																																											
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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments <small>under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</small>																																																																																																																											
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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone (714) 557-3800
Signature			Date	03/28/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 120.00)

<i>Complete If Known</i>	
Application Number	10/812,242
Filing Date	March 29, 2004
First Named Inventor	Chad Thomas Steward
Examiner Name	Young, Brian K
Art Unit	2819
Attorney Docket No.	55123P298

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify):

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. Credit any overpayments

FEES CALCULATION

1. EXTRA CLAIM FEES

Total Claims	24	Excess Claims	Fee Paid
Independent Claims	4	26" = 0 x 50.00 = \$0.00	
Multiple Dependent		4" = 0 x 200.00 = \$0.00	

Large Entity		Small Entity		Fee Description
Fee Code	(#)	Fee Code	(#)	
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SUBTOTAL (1)			(5)	0.00

^{**}or number previously paid, if greater. For Retainers, see below.

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee	Fee	Fee Description
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1254	1,580	2254	785	Extension for reply within fourth month
1255	2,160	2255	1,000	Extension for reply within fifth month
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1480	130	2480	130	Petitions to the Commissioner
1607	50	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1808	180	Submission of Information Disclosure Stmt
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1810	790	2810	395	For each additional invention to be examined (37 CFR 1.17(q))

Other fee (specify)

SUBTOTAL (2)

Fee Paid
120.00

SUBMITTED BY

Name (First/Last)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone	(714) 557-3800
Signature				Date	03/28/05

Based on PTO/SB/17 (12-04) as modified by Blodgett, Sokoloff, Taylor & Zeffman (wtr) 12/15/2004.
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